



May 24, 2017

The Honorable Marlene H. Dortch, Secretary
Federal Communications Commission
Office of the Secretary
445 12th Street, SW
Washington, DC 20554

Electronic Submission: <http://apps.fcc.gov/ecfs/>

RE: Federal Actions to Accelerate Adoption and Accessibility of Broadband-enabled Health Care Solutions and Advanced Technologies (Docket No. 16-46)

The Home Care Technology Association of America (HCTAA), an affiliate of the National Association for Home Care & Hospice (NAHC), which represents the interest of home care and hospice providers and their technology vendor partners, is pleased to submit comments to the Federal Communications Commission and its Connect2Health Task Force.

The delivery of home health care services, including hospice, is an important component of the health care delivery system. There are 33,000 home care providers delivering skilled nursing care to approximately 12 million Americans each year. These primarily older adults have a higher prevalence of acute illness, long-term chronic health conditions, permanent disability, and or terminal illness. Services and therapies are delivered in homes located in both urban and rural settings across the United States.

The delivery of quality of healthcare is extremely dependent upon a home health agencies ability to manage the needs of complex patients and work in partnership with other health care professionals. This new level of longitudinal coordination of care requires sharing of health information amongst various health care providers across the spectrum of care: including home health agencies, hospice, physicians and non-physicians, acute-care hospitals, skilled facilities, rehab facilities, rural trauma centers, social workers and other healthcare personnel. Therefore, we believe broadband-enabled health networks are crucial to coordinate the care of acute and chronically ill seniors and disabled Americans amongst institutional and non-institutional care settings and especially in home and community based care.

Over the past decade, there has been tremendous growth in the adoption of technologies and advanced use of communications by home health agencies, such as, electronic health records, point of care systems, telehealth, remote patient monitoring and mHealth technologies including electronic visit verification systems. According to the latest National State of the Industry Report for Home Health and Hospice Study from 2016-2017, 95 percent of agency respondents had financial billing software systems, 63 percent had electronic health records with the capability to receive and send health information to other health care providers, 72 percent used point of care technologies (e.g. tablet, smartphone, or laptop computer) to capture patient information on-site, and 23 percent use a telehealth or remote patient monitoring systems to enhance their care delivery.

Although the business case for both non-profit and for-profit home care agencies to adopt new technologies remains strong, one major barrier to the adoption and use of these advanced technologies is the lack of adequate broadband capacity, especially in rural based settings. Therefore, we have decided to focus our comments on Objective III: *Strengthen the nation's telehealth infrastructure through the FCC's Rural Health Care Program and other initiatives*. For this section, we hope that you will also accept our 2010 comments to *Rural Health Care Universal Service Support Mechanism* (47 CFR Part 54; Docket No. 02-60) as our arguments for home health agencies to be considered eligible health care providers in rural areas for funds to expand broadband services remains the unchanged.

There are also new regulations on the horizon that lend greater importance to including home health care and hospice providers in future FCC rural broadband infrastructure enhancement programs and universal service support funding. For example, the *CMS Medicare and Medicaid Program: Conditions of Participation for Home Health Agencies* strongly recommends home health agencies accelerate interoperable health information exchange, including the use of certified electronic health record technology and the *21st Century Cures Act* requires state Medicaid program to implement an electronic visit verification system (EVV) for personal care and home health care services. Both of these federal initiatives will be heavily dependent on next generation broadband-enhanced networks.

In closing, we believe it is crucial that a comprehensive national broadband plan consider the importance of including home health care and hospice providers and ask that the FCC and other federal agencies acknowledge the need to make available enhanced broadband and their supported technologies available to post-acute providers in both urban and rural settings. Therefore, we hope to work in collaboration with the FCC's Connect2Health Task Force meet the common goal of accelerating the adoption and accessibility of broadband-enable health care solutions and advanced technologies.

Sincerely,

A handwritten signature in black ink, appearing to read "Richard B.", with a long horizontal stroke extending to the right.

Richard D. Brennan, Jr., MA

Sr. Vice President for Government Affairs, National Association for Home Care &
Hospice and Executive Director of the Home Care Technology Association of America